

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**In re application of:** Thomas John Baldwin et al.

**Application No.** 09/445,788

**Filed:** January 6, 2000

**Confirmation No.:** 1383

**For:** LIVE ATTENUATED VACCINES

**Examiner:** Jennifer E. Graser

**Art Unit:** 1645

**Attorney Reference No.:** 5673-53922

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Agent  
for Applicant(s)

Date Mailed December 19, 2003

COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

**RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT**

This amendment is submitted in response to the Notice of Non-Compliant Amendment dated December 15, 2003. A one-month period for reply was set, making this response due on or before January 15, 2004.

Please amend the referenced application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks** begin on page 6 of this paper.



12/19/03 5673-53922 242558

PATENT

Attorney Reference Number 5673-53922

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TRANSMITTAL LETTER

Enclosed is a Response to Notice of Non-Complaint Amendment for the above application. The fee has been calculated as shown below.

CLAIMS AS AMENDED					
For	No. after amendment	No. paid for previously	Present Extra	Rate	Fee
Total Claims	21	- 24*	= 0	\$18.00	\$ 0.00
Indep. Claims	4	4**	= 0	\$86.00	\$ 0.00
Mult. Dep. Claims Fee (if not previously paid)				\$290.00	
One-month Extension of Time				\$110.00	
Two-month Extension of Time				\$420.00	
Three-month Extension of Time				\$950.00	
Four-month Extension of Time				\$1480.00	
Five-month Extension of Time				\$2010.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					

\* greater of twenty or number for which fee has been paid.

\*\* greater of three or number for which fee has been paid.



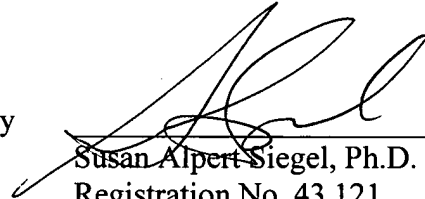
No additional fee is required.

- ☒ Please charge any fees that may be required in connection with filing this amendment and any extension of time, or credit any overpayment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

By

  
\_\_\_\_\_  
Susan Alpert Siegel, Ph.D.  
Registration No. 43,121

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cc: Docketing